

Commentary: Is it possible to bring the emancipatory practice development and evidence-based practice agendas together in nursing and midwifery?

Roberts, Deborah; Williams, Lynne

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Critical commentary for the article for the spring 2017 issue of IPDJ

Is it possible to bring the emancipatory practice development and evidence-based practice agendas together in nursing and midwifery?

Authors: Roberts, D & Williams, L. School of Healthcare Sciences, Bangor University.

Imagine a future where evidence based practice and emancipatory practice development work together in a way that is so seamless it means we don't even have to think about it. Can you?

This is the vision as described in the article by Fairbrother et al (2015). In a bold move, the authors invite the reader to contemplate "the birth of a new healthcare phenomenon", that of evidence-based emancipatory practice development (EBEPD). In the paper, the authors offer a robust case for building momentum to achieving a mutualised evidence-based emancipatory practice development platform for knowledge and development for contemporary nursing practice. With detailed reference to a range of well-known, and often epistemologically polar opposite philosophical positions, the authors invite us to put aside our differences, and work together to build a stronger evidence-based platform for emancipatory practice development work. In their article, the authors, in a creative and interesting manner refer to the Yin and Yang philosophy to illustrate how possible it is for two opposites to complement each other, and they offer a diagram to illustrate the desirable fusion of both EPD and EBP, both working together and nestled within the concept of embodied integrated knowing.

However, we suggest that the model can be developed further; and that the lines are perhaps more blurred than the diagram suggests. We know from reading about the origins of the Yin and Yang concept in Chinese philosophy, that whilst both poles are equal "an increase in one brings a corresponding decrease in the other, a correct balance between the two poles must be reached in order to achieve harmony" (Cartwright, 2012), indicating that both positions should be acknowledged and used in order to achieve EBEPD. Whilst we acknowledge the notion of Yin and Yang being in balance; this positioning does invite us to consider symbiosis. Fairbrother et al (2015) provide a compelling argument to suggest that EPD and EBP (whilst seemingly rooted in different philosophical traditions) are in fact symbiotic; in other words, not only are these two elements in a mutually beneficial close association; they actually need each other in order to survive. We would argue, that out of the temporary imbalance inevitably caused by experimental trialling where action and research

are simultaneously sought; forms the catalyst for growth and movement in the journey. Fairbrother et al draw on the work of Rycroft-Malone et al (2013) to illustrate an example of mixing context-specific inquiry with trialling. The authors also draw on the work of Manley et al (2013), to point out that the process of values clarification is crucial in EPD activity; however, often such values clarification is not straightforward and can provoke feelings of discomfort sometimes associated with reflection (Atkins & Murphy 1994). Indeed such feelings of discomfort may be necessary, and therefore the temporary imbalance is to be embraced in order to move forward where Yin and Yang can be re-balanced once more, allowing for contemplation and preparation for future opposition and movement.

For us personally, the invitation to provide a commentary on this article has provided a timely opportunity for us to reflect on how we might move to develop, engage with and create the environment for such emancipatory practice development within our local context. This for us a timely activity since there is a clear commitment to the creation of such opportunities through a new local appointment of the Foundation of Nursing Studies Professor of Practice Learning; a new joint appointment supported by an academic and clinical partnership. The vision is to enhance health and healthcare through excellence in learning and teaching experiences created for the workforce, the leadership of service improvement and practice development, and through establishing related research.

Whilst the creation of traditional programmes of study is important for expansion amongst the nursing workforce, there is an increasing call for educational providers to devise new approaches to supporting the development of clinicians and services (Ousey & Roberts, 2012). No longer are those commissioning education and training content with supporting academic programmes of education as the sole source of development; they are turning towards other approaches such as “providing opportunity to engage nurses at all levels of the organisation in developing workplaces in the form of practice development opportunities that:

- Are safe and progressive evidence based clinical services
- Understand the patient experience and involve patients in decision making
- Have explicit values and purpose statements to guide team behaviours
- Enable front line nurses to be involved in decision-making at the local and organisational level

- Provide opportunities for nurses to be creative and innovative
- Reflect on and develop practice” (p72 Walsh et al, 2012).

The paper presents a clear overview of the philosophical positions underpinning practice development and evidence based practice. The point is well made that nursing as a group is under recognised for the contribution to the changing landscape of healthcare. Practical wisdom is undervalued and nursing work remains under researched. This paper also presents an opportunity for important but underrepresented work that is so valuable to improving practice and patient outcomes, to flourish under the guise of doing and reporting EBEPD. If Fairbrother and colleagues are correct in their suggestion that the emancipatory practice and evidence based practice agendas can be brought together; then individuals working in either or both arenas have a responsibility to acknowledge and accept the symbiotic nature of the relationship between the two. The world of practice development through evidence based practice is necessarily a fast paced and seldom stable platform; but none the less is one where we are required to put our philosophical stance to one side in order to embrace the instability and foster growth and development of both individuals and services.

The authors pose a number of reflective questions at the end of the article, which return to the possible tensions between EPD and PD. For us, in the *doing* of research that is concerned with emancipatory practice development we advocate a pragmatic approach; one which focuses on the action of the doing. To return to Yin and Yang, improving our understanding of the fluidity and imbalance that will inevitably be present should enable the kind of symbiotic development and growth in both individuals and services that Fairbrother and colleagues have described. So rather than push against such imbalance, we suggest that nurses, midwives, researchers and academics work together towards mastery of it; learning how to manage and work within an ever changing landscape.

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